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PTO/SB/21 (09-04)

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<b>TRANSMITTAL FORM</b>  (to be used for all correspondence after initial filing)	Application Number	10/809,345-Conf. #7564
	Filing Date	March 26, 2004
	First Named Inventor	Jihong ZHOU
	Art Unit	1725
	Examiner Name	C. A. Johnson
Total Number of Pages in This Submission	Attorney Docket Number	0789-0183PUS1

ENCLOSURES (Check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance Communication to TC
<input checked="" type="checkbox"/> Fee Attached	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input checked="" type="checkbox"/> Amendment/Reply	<input type="checkbox"/> Petition	<input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Terminal Disclaimer	<input checked="" type="checkbox"/> Other Enclosure(s) (please Identify below):
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Request for Refund	Return Receipt Postcard
<input checked="" type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> CD, Number of CD(s) _____	Check in the amount of \$180.00
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> Landscape Table on CD	
<input type="checkbox"/> Reply to Missing Parts/Incomplete Application	Remarks	
<input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm Name	BIRCH, STEWART, KOLASCH & BIRCH, LLP		
Signature			
Printed name	James M. Slattery		
Date	October 26, 2005	Reg. No.	28,380

*NS*



<b>Effective on 12/08/2004.</b> <b>Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).</b>		<b>Complete if Known</b>	
<b>FEE TRANSMITTAL</b> <b>For FY 2005</b>		Application Number	10/809,345
		Filing Date	March 26, 2004
		First Named Inventor	Jihong ZHOU
		Examiner Name	C. A. Johnson
		Art Unit	1725
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27	Attorney Docket No.	0789-0183PUS1	
<b>TOTAL AMOUNT OF PAYMENT</b>		<b>(\$)</b> 180.00	

**METHOD OF PAYMENT** (check all that apply)

☒ Check ☐ Credit Card ☐ Money Order ☐ None ☐ Other (please identify): \_\_\_\_\_

☐ Deposit Account Deposit Account Number: 02-2448 Deposit Account Name: Birch, Stewart, Kolasch & Birch, LLP

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

☐ Charge fee(s) indicated below ☐ Charge fee(s) indicated below, except for the filing fee

☒ Charge any additional fee(s) or underpayment of fee(s) under 37 CFR 1.16 and 1.17 ☒ Credit any overpayments

**FEE CALCULATION**

**1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	

**2. EXCESS CLAIM FEES**

Fee Description	Fee (\$)	Small Entity Fee (\$)
Each claim over 20 (including Reissues)	50	25
Each independent claim over 3 (including Reissues)	200	100
Multiple dependent claims	360	180

**Total Claims** 19 - 20 =        x        =        **Fee Paid (\$)**

**Multiple Dependent Claims**  
**Fee (\$)**        **Fee Paid (\$)**       

**Indep. Claims** 1 - 3 =        x        =        **Fee Paid (\$)**

**3. APPLICATION SIZE FEE**

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

**Total Sheets**        - 100 =        / 50        (round up to a whole number) x        =        **Fee Paid (\$)**

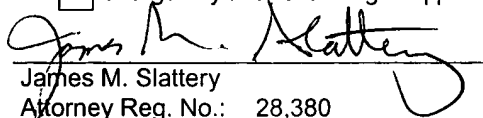
**4. OTHER FEE(S)**

Non-English Specification, \$130 fee (no small entity discount)

Other (e.g., late filing surcharge): 1806 Submission of an Information Disclosure Statement        **Fees Paid (\$)** 180.00

<b>SUBMITTED BY</b>			
Signature		Registration No. (Attorney/Agent)	28,380
Name (Print/Type)	James M. Slattery	Date	October 26, 2005



<b>AMENDMENT TRANSMITTAL LETTER</b>				Docket No. 0789-0183PUS1																																											
Application No. 10/809,345-Conf. #7564		Filing Date March 26, 2004		Examiner C. A. Johnson																																											
				Art Unit 1725																																											
Applicant(s): Jihong ZHOU																																															
Invention: Y-ZEOLITE-CONTAINING COMPOSITE MATERIAL AND A PROCESS FOR PREPARING THE SAME																																															
<b>MS Amendment</b> Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450																																															
Transmitted herewith is an amendment in the above-identified application.																																															
The fee has been calculated and is transmitted as shown below.																																															
<table border="1" style="width:100%"><tr><th colspan="6">CLAIMS AS AMENDED</th></tr><tr><th></th><th>Claims Remaining After Amendment</th><th>Highest Number Previously Paid</th><th>Number Extra Claims Present</th><th colspan="2">Rate</th></tr><tr><td>Total Claims</td><td>19</td><td>- 20 =</td><td>0</td><td>x</td><td>0.00</td></tr><tr><td>Independent Claims</td><td>1</td><td>- 3 =</td><td>0</td><td>x</td><td>0.00</td></tr><tr><td colspan="4">Multiple Dependent Claims (check if applicable)</td><td colspan="2"><input type="checkbox"/></td></tr><tr><td colspan="4">Other fee (please specify):</td><td colspan="2"></td></tr><tr><td colspan="4"><b>TOTAL ADDITIONAL FEE FOR THIS AMENDMENT:</b></td><td colspan="2"><b>0.00</b></td></tr></table>						CLAIMS AS AMENDED							Claims Remaining After Amendment	Highest Number Previously Paid	Number Extra Claims Present	Rate		Total Claims	19	- 20 =	0	x	0.00	Independent Claims	1	- 3 =	0	x	0.00	Multiple Dependent Claims (check if applicable)				<input type="checkbox"/>		Other fee (please specify):						<b>TOTAL ADDITIONAL FEE FOR THIS AMENDMENT:</b>				<b>0.00</b>	
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<b>TOTAL ADDITIONAL FEE FOR THIS AMENDMENT:</b>				<b>0.00</b>																																											
<input checked="" type="checkbox"/> Large Entity <span style="margin-left: 200px;"><input type="checkbox"/> Small Entity</span>																																															
<input checked="" type="checkbox"/> No additional fee is required for this amendment.																																															
<input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of \$ _____. A duplicate copy of this sheet is enclosed.																																															
<input type="checkbox"/> A check in the amount of \$ _____ to cover the filing fee is enclosed.																																															
<input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.																																															
<input checked="" type="checkbox"/> The Director is hereby authorized to charge and credit Deposit Account No. <u>02-2448</u> as described below. A duplicate copy of this sheet is enclosed.																																															
<input checked="" type="checkbox"/> Credit any overpayment.																																															
<input checked="" type="checkbox"/> Charge any additional filing or application processing fees required under 37 CFR 1.16 and 1.17.																																															
 James M. Slattery Attorney Reg. No.: 28,380				Dated: <u>October 26, 2005</u>																																											
BIRCH, STEWART, KOLASCH & BIRCH, LLP 8110 Gatehouse Road Suite 100 East P.O. Box 747 Falls Church, Virginia 22040-0747 (703) 205-8000																																															

